

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Aug</i>		2/7/00
O.L.P.E. CLASSIFIER		59	9/12
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>AB</i>	5222	10-12-00

INDEX OF CLAIMS

✓ _____ Rejected
 - (Through numeral) _____ Allowed
 + _____ Canceled
 _____ Restricted
 H _____ Non-elected
 I _____ Interference
 A _____ Appeal
 O _____ Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

08/15/00

APPL 09

APPLICANTS

DATE

DATE

☐ The subject has been
☐ The subject has not been

WARD

The last processed